

**New Mexico**

**New Mexico Oil Conservation Division (NMOCD)**

**New Mexico Energy, Minerals and Natural Resources  
Department (NMEMNRD)**

**Re: 7520 Reports for the Fourth Quarter of FY2012**

**4<sup>th</sup> Quarter Period: (October 1, 2011 --- September 30, 2012)**

**Date: (Monday) October 29, 2012**

**Time: 2:47pm**

**Reference File**

**Code: WA-UI-PP**

State of New Mexico  
Energy, Minerals and Natural Resources Department

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**Susana Martinez**  
Governor

**John Bemis**  
Cabinet Secretary

**Brett F. Woods, Ph.D.**  
Deputy Cabinet Secretary

**Jami Bailey**  
Division Director  
Oil Conservation Division



**October 29, 2012**

U.S. EPA – Region 6  
6WQ-SG  
1445 Ross Avenue, Suite 1200  
Dallas, Texas 75202-2733  
ATTN: Mr. Omar Martinez

Dear Mr. Martinez:

Enclosed, please find the New Mexico Oil Conservation Division's 7520 reports, Parts 1, 2A, 2B, 3, & 4 for the period from October 1, 2011 through September 30, 2012.

Please feel free to contact me if you have any questions or concerns.

Sincerely,


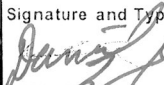
J. Daniel Sanchez  
UIC Director  
505-476-3493  
Daniel.sanchez@state.nm.us


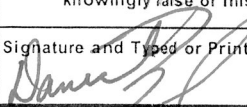
RECEIVED  
SOURCE WATER  
PROTECTION BRANCH  
12 OCT 31 PM 2:47  
6WQ-S

**Reference File  
Code: WA-UI-PP**

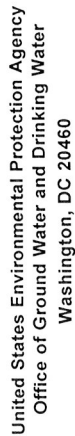
United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 <b>EPA</b> <b>UIC Federal Reporting System</b> <b>Part I: Permit Review and Issuance/          Wells in Area of Review</b> (This information is solicited under the authority of the Safe Drinking Water Act)					<b>I. Name and Address of Reporting Agency</b> United States Environmental Protection Agency Oil Conservation Division Energy Mineral and Natural Resources Department 1220 South Saint Francis, Santa Fe, New Mexico, 87508						
<b>II. Date Prepared (month, day, year)</b> 10/31/2012			<b>III. State Contact (name, telephone no.)</b> J. Daniel Sanchez 505-476-3493		<b>IV. Reporting Period (month, year)</b> From <b>October 1, 2011</b> To <b>09/30/2012</b>						
Item					Class and Type of Injection Wells						
					I	II			III	IV	V
					SWD 2D	ER 2R	HC 2H				
<b>V. Permit Application</b> Number of Permit Applications Received					119	20	0				
VI. Permit Determin- ation	Permit  Issued	A	Number of Individual Permits Issued (One Well)	New Wells	0	77	10	0	1	0	
			Existing Wells	0	39	9	0	0	0		
		B	Number of area Permits* Issued (Multiple Wells) (*See instructions on back)	New Well Field	0	27	10	0	0	1	
			Existing Well Field	0	27	9	0	0	0		
		C	Number of Wells in Area Permits (See B above)	New Wells	0	27	17	0	0	1	
				Existing Wells	0	27	17	0	0	0	
	Permit Not Issued	D	Number of Permits Denied/Withdrawn (after complete technical review)		0	57	6	0	0	0	
	Modification Issued	E	Number of Major Permit Modifications Approved		0	33	9	0	0	0	
<b>VII. Permit File Review</b> Number of Rule-Authorized Class II Wells Reviewed				Wells Reviewed							
				Wells Deficient							
VIII. Area of Review (AOR)	Wells Reviewed	A	Number of Wells in Area of Review	Abandoned Wells	0	58	109	0	1	0	
				Other Wells	0	117	329	0	2	0	
	Wells Identified for C/A	B	Number of Wells Identified for Corrective Action	Abandoned Wells	0	31	6	0	0	0	
				Other Wells	0	27	6	0	0	0	
	Wells with C/A	C	1. Number of Wells in AOR with Casing Repaired/Recemented C/A								
			2. Number of Active Wells in AOR Plugged/Abandoned								
			3. Number of Abandoned Wells in AOR Replugged								
			4. Number of Wells in AOR with "Other" Corrective Action								
<b>IX. Remarks/Ad Hoc Report (Attach additional sheets if necessary)</b>											
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.											
Signature, and Typed or Printed Name and Title of Person Completing Form Daniel Sanchez, OCD UIC Director								<b>Date</b> 10/25/2012		<b>Telephone No.</b> (505) 476-3493	

 <p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p><b>UIC Federal Reporting System</b> <b>Part II: Compliance Evaluation</b></p> <p>(This information is solicited under the authority of the Safe Drinking Water Act)</p>				<p><b>I. Name and Address of Reporting Agency</b></p> <p>United States Environmental Protection Agency Oil Conservation Division 1220 South St. Francis Drive Santa Fe, NM 87505</p>						
<p><b>II. Date Prepared (month, day, year)</b></p> <p>10/31/2012</p>		<p><b>III. State Contact (name, telephone no.)</b></p> <p>J. Daniel Sanchez, (505)476-3493</p>		<p><b>IV. Reporting Period (month, year)</b></p> <p>From <b>October 1, 2011</b> To <b>September 30, 2012</b></p>						
				Class and Type of Injection Wells						
				I	II			III	IV	V
Item					SWD 2D	ER 2R	HC 2H			
V.  Summary of Violations	Total Wells	A	Number of Wells with Violations	4	84	225	0	0		0
	Total Violations	B	1. Number of Unauthorized Injection Violations	0	0	1	0	0		0
			2. Number of Mechanical Integrity Violations	0	38	157	0	0		0
			3. Number of Operation and Maintenance Violations	0	7	10	0	0		0
			4. Number of Plugging and Abandonment Violations	0	2	0	0	0		0
			5. Number of Monitoring and Reporting Violations	0	0	2	0	0		0
			6. Number of Other Violations (Specify) Missed 2011 MIT Q4 Date	4	37	50	0	0		0
VI.  Summary of Enforcement	Total Wells	A	Number of Wells with Enforcement Actions	0	32	135	0	0		0
	Total Enforcement Actions	B	1. Number of Notices of Violation	0	0	0	0	0		0
			2. Number of Consent Agreements	0	0	0	0	0		0
			3. Number of Administrative Orders	0	0	0	0	0		0
			4. Number of Civil Referrals	0	0	0	0	0		0
			5. Number of Criminal Referrals	0	0	0	0	0		0
			6. Number of Well Shut-ins	0	0	0	0	0		0
			7. Number of Pipeline Severances	0	0	0	0	0		0
8. Number of Other Enforcement Actions (Specify) Emergency Inspections	0	32	134	0	0		0			
VII. Summary of Compliance	Number of Wells Returned to Compliance		A. This Quarter	0	1	5	0	0		0
			B. This Year	4	51	153	0	0		0
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW			0	0	0	0	0		0
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days			100	0	0	0	0		0
<p><b>X. Remarks/Ad Hoc Report (Attach additional sheets)</b> Class I Operators missed 9:30 MIT schedule deadline, but resolved shortly after deadline.</p>										
<p><b>Certification</b></p> <p>I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.</p>										
<p>Signature and Typed or Printed Name and Title of Person Completing Form</p> <p> Daniel Sanchez, OCD UIC Director</p>								<p>Date</p> <p>10/25/2012</p>		<p>Telephone No.</p> <p>(505) 476-3493</p>

 <p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p><b>UIC Federal Reporting System</b> <b>Part II: Compliance Evaluation</b> <b>Significant Noncompliance</b> (This information is solicited under the authority of the Safe Drinking Water Act)</p>				<p><b>I. Name and Address of Reporting Agency</b></p> <p>United States Environmental Protection Agency Energy, Minerals &amp; Natural Resources Department Oil Conservation Division 1220 South St. Francis Drive Santa Fe, NM 87505</p>												
<p><b>II. Date Prepared (month, day, year)</b></p> <p>10/31/2012</p>		<p><b>III. State Contact (name, telephone no.)</b></p> <p>J. Daniel Sanchez, (505)476-3493</p>		<p><b>IV. Reporting Period (month, year)</b></p> <p>From <b>October 1, 2011</b> To <b>09/30/2012</b></p>												
				<p><b>Class and Type of Injection Wells</b></p> <table border="1"> <thead> <tr> <th rowspan="2">I</th> <th colspan="3">II</th> <th rowspan="2">III</th> <th rowspan="2">IV</th> <th rowspan="2">V</th> </tr> <tr> <th>SWD 2D</th> <th>ER 2R</th> <th>HC 2H</th> </tr> </thead> </table>			I	II			III	IV	V	SWD 2D	ER 2R	HC 2H
I	II			III	IV	V										
	SWD 2D	ER 2R	HC 2H													
<p><b>V. Summary of Significant Non-Compliance (SNC)</b></p>	Total Wells	A	Number of Wells with SNC Violations	0	0	0	0	0								
	Total Violations	B	1. Number of Unauthorized Injection SNC Violations	0	0	0	0	0								
			2. Number of Mechanical Integrity SNC Violations	0	0	0	0	0								
			3. Number of Injection Pressure SNC Violations	0	0	0	0	0								
			4. Number of Plugging and Abandonment SNC Violations	0	0	0	0	0								
			5. Number of SNC Violations of Formal Orders	0	0	0	0	0								
			6. Number of Falsification SNC Violations	0	0	0	0	0								
			7. Number of Other SNC Violations (Specify)	0	0	0	0	0								
<p><b>VI. Summary of Enforcement Against SNC</b></p>	Total Wells	A	Number of Wells with Enforcement Actions Against SNC	0	0	0	0									
	Total Enforcement Actions	B	1. Number of Notices of Violation	0	0	0	0									
			2. Number of Consent Agreements/Orders	0	0	0	0									
			3. Number of Administrative Orders	0	0	0	0									
			4. Number of Civil Referrals	0	0	0	0									
			5. Number of Criminal Referrals	0	0	0	0									
			6. Number of Well Shut-ins	0	0	0	0									
			7. Number of Pipeline Severances	0	0	0	0									
8. Number of Other Enforcement Actions Against SNC Violations (Specify)	0	0	0	0												
<p><b>VII. Summary of Compliance</b></p>	Number of Wells in SNC Returned to Compliance		A. This Quarter	0	0	0	0									
			B. This Year	0	0	0	0									
<p><b>VIII. Contamination</b></p>	Number of Cases of Alleged Contamination of a USDW															
<p><b>IX. Well Closure</b></p>	Class IV/Endangering Class V Well Closures			Involuntary Well Closure												
				Voluntary Well Closure												
<p align="center"><b>Certification</b></p> <p>I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.</p>																
<p>Signature and Typed or Printed Name and Title of Person Completing Form</p> <p> Daniel Sanchez, NM UIC Director</p>				<p>Date</p> <p>10/25/2012</p>		<p>Telephone No.</p> <p>(505) 476-3493</p>										

 <p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p><b>UIC Federal Reporting System</b> <b>Part III: Inspections</b> <b>Mechanical Integrity Testing</b></p> <p>(This information is solicited under the authority of the Safe Drinking Water Act)</p>				<p><b>I. Name and Address of Reporting Agency</b></p> <p>United States Environmental Protection Agency Energy, Minerals &amp; Natural Resources Department Oil Conservation Division 1220 South St. Francis Drive Santa Fe, NM 87505</p>					
<p><b>II. Date Prepared (month, day, year)</b></p> <p>10/31/2012</p>		<p><b>III. State Contact (name, telephone no.)</b></p> <p>J. Daniel Sanchez, 505-476-3493</p>		<p><b>IV. Reporting Period (month, year)</b></p> <p>From <b>October 1, 2011</b> To <b>09/30/2012</b></p>					
				Class and Type of Injection Wells					
				I	II				
					SWD 2D	ER 2R			
						HC 2H			
						III			
						IV			
						V			
V. Summary of Inspections	Total Wells	A	Number of Wells Inspected	5	1,274	4,361	0	3	1
	Total Inspections	B	1. Number of Mechanical Integrity Tests (MIT) Witnessed	2	545	3,166	0	3	0
			2. Number of Emergency Response or Complaint Response Inspections	0	0	0	0	0	0
			3. Number of Well Constructions Witnessed	0	0	0	0	0	0
			4. Number of Well Pluggings Witnessed	0	21	75	0	0	0
			5. Number of Routine/Periodic Inspections	0	708	1,120	0	0	0
VI. Summary of Mechanical Integrity (MI)	Total Wells	A	Number of Wells Tested or Evaluated for Mechanical Integrity (MI)	5	595	3,202	0	3	1
		B	No. of Rule-Authorized Wells Tested/Evaluated for MI	Passed 2-part test					
	Failed 2-part test								
	For Significant Leak	C	1. Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	0	0			
				Well Failed	0	0			
			2. No. of Casing/Tubing Pressure Tests	Well Passed	5	172	622	3	1
				Well Failed	30	86			
			3. Number of Monitoring Record Evaluations	Well Passed	0	0			
				Well Failed	0	0			
			4. No. of Other Significant Leak Tests/Evaluations (Specify)	Well Passed	370	3,062			
				Well Failed	14	122			
	For Fluid Migration	D	1. Number of Cement Record Evaluations	Well Passed	0	0			
				Well Failed	0	0			
			2. Number of Temperature/Noise Log Tests	Well Passed	0	0			
Well Failed				0	0				
3. No. of Radioactive Tracer/Cement Bond Tests			Well Passed	0	0				
			Well Failed	0	0				
4. No. of Other Fluid Migration Tests/Evaluations (Specify)			Well Passed	0	0				
			Well Failed	0	0				
VII. Summary of Remedial Action	Total Wells	A	Number of Wells with Remedial Action	0	51	385	0	0	0
	Total Remedial Actions	B	1. Number of Casing Repaired/Squeeze Cement Remedial Actions	0	0	2	0	0	0
			2. Number of Tubing/Packer Remedial Actions	0	0	0	0	0	0
			3. Number of Plugging/Abandonment Remedial Actions	0	0	2	0	0	0
			4. Number of Other Remedial Actions (Specify)	0	0	27	0	0	0
	VIII. Remarks/Ad Hoc Report (Attach additional sheets)								
<p><b>Certification</b></p> <p>I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.</p>									
<p>Signature and Typed or Printed Name and Title of Person Completing Form</p> <p> Daniel Sanchez, OCD UIC Director</p>							<p>Date</p> <p>10/25/2012</p>	<p>Telephone No.</p> <p>(505) 476-3493</p>	





OMB No. 2040-0042

Approval expires 1/31/05

# UIC Federal Reporting System

## Part IV: Quarterly Exceptions List

(This information is collected under the authority of the Safe Drinking Water Act)

I. Reporting Period	
From	To
10/01/2011	09/30/2012

[illegible]

## Certification

**Certification**

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

**Signature of Person Completing Form**

Typed or Printed Name and Title

Typed or Printed Name and Title  
J. Daniel Sanchez, NM OCD UIC Director

Date \_\_\_\_\_

10/25/2012

Telephone No. \_\_\_\_\_

(505) 476-3493

EPA Form 7520-4 (Rev. 8-01)

Previous edition is obsolete.

## Reference File

Code: WA-UI-PP

## Instructions and Definitions

The quarterly Exceptions list is used to track wells reported in significant noncompliance (SNC) on EPA Form 7520-2B for two or more consecutive quarters without being addressed with a formal enforcement action or returned to compliance. Any SNC reported on Form 7520-4 shall be reported until the SNC is resolved. Once a SNC is reported as resolved, it need not appear in subsequent reports.

### Section I - Reporting Period

All reporting is cumulative, year to date, beginning with October 1.

### Section II - Well Class and Type

Enter the well class and type of each well in SNC for two or more consecutive quarters. For Class I wells, specify IH for hazardous waste, IM of municipal waste, Ii for industrial waste. For Class II wells, specify IID for saltwater disposal, IIR for enhanced recovery, IIH for liquid hydrocarbon storage.

### Section III - Name and Address of Owner/Operator

Enter the name and address of the owner/operator of the injection well. Use multiple lines of the form if needed. (You may use one form for each owner/operator.)

### Section IV - Well ID No. (Permit No.)

Enter the I.D. number of the injection well in SNC. If the well has a UIC permit number, enter this as the I.D. number.

### Section V - Summary of Violations

Enter the date the SNC violation was first identified and place an "X" in the appropriate column. In the event that there were multiple SNC violations for a single well, enter each violation and the date it was identified on a separate line.

### Section VI - Summary of Enforcement

Enter the date an enforcement action was taken against the SNC violation and place an "X" in the appropriate column. In the event that there were multiple enforcement actions, enter each enforcement action and the date it was taken on a separate line.

### Paperwork Reduction Act

The public reporting and record keeping burden for this collection of information is estimated to average 2 hours per response. Burden means the total time, effort, or financial resource expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal Agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to the collection of information; search data sources; complete and review the collection of information; and, transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.